## LABOR COMPLIANCE PROGRÂM ANNUAL REPORT

Format for Approved Program those contracts with Awarding Bodies to provide labor compliance enforcement

Report for the reporting period	02/01/2009	to	01/31/2010	
	(mm/dd/yyyy)		(mm/dd/yyyy)	Ī

Name of Labor Compliance Program (LCP) :							
Parsons Constructors Inc.							
2. LCP I.D. Number (assigned by DIR):							
2003.00045							
3. Date of Initial Approval:							
02/25/2003							
4. Contact person (include name, title, address, te	lephone, fax, and e-mail, if available):						
Mr. Mark L. Johnson	Ph: 206-494-0912/702-525-8900						
600 University Street, Suite 700	206-714-7029						
SeaTac, WA 98188-4236	Fax: 206-494-0960						
	ort as well as any other Awarding Bodies with whom the LCP currently has a contract to provide compliance						
	to item 7 and provide all requested information. Then complete the information below, and sign and submit this P Special Assistant455 Golden Gate Avenue, 10 <sup>th</sup> Floor, and San Francisco, CA 94102.						
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Freeport Regional Water Authority

9240 Laguna Springs Drive Suite 100

Elk Grove, CA 95758

## LCP-AR3

What suggestions do you have for the Department of Industrial Relations to better assist you with your program in necessary):	n the coming year? (attach additional sheets if
We have no suggestions to add at this time.	
SUBMITTED BY:  MAKK L. JOHNSON, VICE PRESIDENT  Signature  Name and Title	MARCH 15,2010
Signature   Name and little	Date

6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary, and *please complete separate forms for each* Awarding Body covered in this report).

Awarding Body: Freeport Regional Water Authority (FRWA)

A. List projects handled by LCP within the past 12 months.

Project Name	Bid Advertisement Date	Prime Contractor	Contract Amount
Freeport Regional Water Authority Pipeline Project	April 15, 2007	Mountain Cascade Construction	\$48, 795, 280.00
Total			\$48, 795,280.00

B. Summary of all wages and penalties assessed and/or recovered.

god ga	Project Name	Affected Contractor (who directly employed the worker)	Amount Assessed	Amount Recovered	Approval of Forfeiture Requested from Labor Commissioner?	Description of Violation
j »·	FRWA Pipeline Project				Г Yes Г No	
	FRWA Pipeline Project				Г Yes Г No	
	FRWA Pipeline Project				Г Yes Г No	
	FRWA Pipeline Project				Γ Yes Γ No	
	FRWA Pipeline Project				Γ Yes Γ No	
	FRWA Pipeline Project				Г Yes Г No	
	FRWA Pipeline Project				Г Yes Г No	

## LCP-AR3

Total	
FRWA Pipeline Project	Γ Yes Γ No
FRWA Pipeline Project	Г Yes Г No
FRWA Pipeline Project	Г Yes Г No
FRWA Pipeline Project	Г Yes Г No
FRWA Pipeline Project	Г Yes Г No
FRWA Pipeline Project	Г Yes Г No
FRWA Pipeline Project	T Yes T No

C. For any amount identified in item B for which approval of forfeiture not requested from the Labor Commissioner, please explain below.

	Project Name	Amount Assessed	Amount Recovered	Explanation
	Not Applicable			No violations of California Public Works prevailing Wage Law occurred during this reporting period. Project site work concluded during December 2008 and all monitoring efforts ceased during March of 2009
<u>. )</u> .	Total			

D. For any amount identified in item B for which approval of forfeiture was requested from the Labor Commissioner, please provide the following:

l	Project		Amount	Assessed				Amount	Recovered		
١	Name	LC §1776(g)	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
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	1		1							Į	1

LCP-AR3								
Total								
Identify agges that are an user the subject of C & 1742 mass dive								

E. Identify cases that are or were the subject of LC § 1742 proceedings.

Project Name	Contractor	Nature of Violation	ODL Case #	Current Status

F. Did you refer a	F. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1?						
Please check one:	☐ Yes	🔀 No					
If yes, identify	affected contra	actor(s) or subcontractor(s)	and date(s) of referral:				

G. Did you refer any apprenticeship violation to the Division of Apprenticeship Standards (DAS)?

Please check one:

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: Will make referral to DAS on or about March 13, 2009, 5 working days after the official substantial completion date of project; for contractor who did not provide proof of apprenticeship registration

## LCP-AR3

- 7. On a separate sheet, provide a certificate of compliance with conflict of interest disclosure requirements by employees and consultants who participate in making governmental decisions (as defined under 2 CCR § 18701) along with the names of LCP personnel who are filing disclosure statements and the agencies with which those statements are being filed.
- 8. Please update the following information per 8 CCR § 16426(a) (2), (3) and (5) disclosure requirement.
- A. Identify the geographical areas in which the program intends to operate and the identity of any public agencies not previously identified in this report with which the program intends to contract to provide labor compliance enforcement.

California – Statewide

B. State whether the entity shares personnel, management, ownership or other close affiliation with any of the following: (1) any contractor or subcontractor that within the preceding five years has been awarded a public works contract within the geographical area in which the program operates or intends to operate or with any public agency with which the program has contracted or intends to contract to provide labor compliance enforcement; (2) any person or entity who has been the surety on such a contract; (3) any joint labor-management committee established pursuant to the Federal Labor Management Cooperation Act of 1978 (section 175a of Title 29 of the United States Code); or (4) any person or entity who has represented workers employed in the same or similar classifications as those employed for such a contract and who has been engaged in (i) an organizational campaign under the National Labor Relations Act with contractors competing for such contracts or (ii) a jurisdictional dispute with another collective bargaining representative of workers utilized for such contracts.

For each affiliation, please provide the name, address, telephone number, and principal contact person for the person or entity; please identify shared personnel, management, and ownership; and if applicable, please provide a short description of the nature and extent of any other close affiliation:

To the best of my knowledge, no known Parsons Constructors Inc employee shares personnel, management, ownership or other close affiliation with any of the following entities: The Freeport Regional Water Authority (FRWA), Mountain Cascade Construction (MCI), nor any subcontractor to MCI; any person or entity who has been surety on said project; any joint labor –management committee; any person or entity who has represented workers employed in the same or similar

lassifications as those employed for said contract.

C. Identify the attorney or law firm available to provide legal support for the LCP, and whether the persons or firms providing that support also represent any contractor, subcontractor, surety, or worker representative referred to in the preceding item.

Attorney/Law Firm Name (include address, contact person, and telephone number)

Susan Cole, Assistant General Counsel – Parsons Corporation 100 W. Walnut Street Pasadena, CA 91124 1-626-440-3810 Fax: 1626-440-2923

LCP ANNUAL REPORT 8 CCR § 16431 -- 3<sup>rd</sup> Party